## Psychological Health & Development Associates, LLC

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RE: Bill numbers (SB1022/HB5596)

I am writing to document my support for Bill numbers (SB1022/HB5596). These bills (1) make permanent the acceptance of telehealth as delivery method for psychological services (including audio-only telehealth) and (2) make permanent an equivalent reimbursement rate for telehealth as for in-person services.

The pandemic rapidly changed my practice model such that within a week I moved the entire practice over to telemedicine in keeping the state and national pandemic guidelines to provide continuity of care to my patients. While initially concerned about losing quality of care via telemedicine, I was very pleased to discover that quality was not lost and I have found many benefits of this method of treatment. To be able to continue to provide much needed services to patients while keeping everyone safe was the primary impetus for adding this method of treatment, but since then I have discovered that quality of care was not lost when providing telemedicine service and, in some cases, actually enhanced some connections. The benefits of being able to continue to utilize telemedicine even when CO-VID 19 is no longer preventing in-office treatment is that it allows patients with a variety of problems to have access to care when they don't have reliable transportation, weather inhibits safe travel, childcare interferes with presenting for in office visits, and allows patients who do have some sort of illness/ exposure to illness or compromised immune symptoms to continue to access help without compromising health and safety. Patients are readily expressing desire for having an option for ongoing telemedicine services post pandemic for all of these reasons and more.

Additionally, reimbursement should absolutely remain the same as it is for office visits for psychotherapy because the complexity and durational aspects of the cases and treatment are not diminished when providing telehealth services. While I understand for some other disciplines there is an argument to be made that some services normally provided in-office are not happening with telemedicine- such is NOT the case with the provision of mental health services.

As a Psychologist I am ethically and legally obligated to support patients in need of clinical mental health support even between sessions, when office visits cannot always be scheduled for a variety of reasons. Prior to the CO-VID19 pandemic allowances I was simply never reimbursed for these services, but telephone support was provided when needed in the best interests of my patients though in the past I felt in-office treatment whenever possible was superior. However, now I have come to rethink that position. Telemedicine is now a tried, trusted and true methodology for the delivery of mental health services and patients have benefitted from having access to this modality and that should not change simply because CO-VID ceases to be a threat.

Janine Swanson, PsyD	3/15/21
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